

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	SALTS OF CODRUGS AND USES RELATED THERETO
Attorney Docket Number::	CDSI-P01-005
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	2
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Paul
Family Name::	Ashton
City of Residence::	Boston
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	19 Brimmer Street
City of mailing address::	Boston
State or Province of mailing address::	MA

Postal or Zip Code of mailing address:: 02108-1025

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Tadeusz  
Family Name:: Cynkowski  
City of Residence:: Brookline  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 99 Pond Avenue  
#220  
City of mailing address:: Brookline  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02445

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Grazyna  
Family Name:: Cynkowska  
City of Residence:: Brookline  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 99 Pond Avenue  
#220  
City of mailing address:: Brookline  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02445

**Correspondence Information**

Correspondence Customer Number:: 28120

**R presentative Information**

Representative Customer Number:: 28120

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/441726	01/21/03

**Assignee Information**

Assignee name:: Control Delivery Systems, Inc.

Street of mailing address:: Control Delivery Systems, Inc.  
400 Pleasant Street

City of mailing address:: Watertown

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02472